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UTILITY

Attorney Docket No.	8308			
First Inventor or Applica	tion Identifier	Paul John Rennie		
Title		For Prevention and Treat Like Symptoms and Thei Use		
Express Mail Label No.		EJ302199429US	ဥ	

ฐ PATENT APPLICATION	Title		and Influenza-Like Symptoms and Their Methods of Use
TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)	Express	Mail Label No.	EJ302199429US
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application co	ntents.	ADDRESS TO	Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. [x] * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. [x] Specification Total Pages [] (preferred arrangement set forth below) - Descriptive Title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix		6. Nucleot (if applic a. [] b. []	ofiche Computer Program (Appendix) ide and/or Amino Acid Sequence Submission able, all necessary) Computer Readable copy Paper Copy (identical to computer copy) Statement verifying identity of above copies
- Background of the Invention		ACC	COMPANYING APPLICATION PARTS
- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. [] Drawing(s) (35 USC 113) Total Sheets [] 4. Oath or Declaration Total pages [2] a. [x] Newly executed (original or copy) UNSIGNE	D	8. [] 37 (/w 9. [] Eng 10. [] Info Si 11. [] Pre	ignment Papers (cover sheet & document(s)) CFR 3.73(b) Statement [] Power of Attorney then there is an assignee) glish Translation Document (if applicable) translation Disclosure [] Copies of IDS tatement (IDS)/PTO-1449 Citations eliminary Amendment [] Copies of IDS (Indianary Amendment (IDS)/PTO-1449 Citations)
b. [] Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 16 comple i. [] DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) a 1.33(b).	eled)	13. [] *Sr S 14. [] Ce (i) 15. [] Oth	Should be specifically itemized) nall Entity [] Statement filed in prior application statement(s) Status still proper and desired rtified Copy of Priority Document(s) of foreign priority is claimed) ner:
NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37. C.F.R. §1.27), EXCEPT IF ONE FILED IN A PARPLICATION IS RELIED UPON (37 C.F.R.§1.28).	RIOR		
16. If a CONTINUING APPLICATION, check appropria amendment: [] Continuation [] Divisional [] Continuation- 			uisite information below and in the preliminary application No/_

Prior a	application information: Exami	ner: Group//	Art Unit:		
For CONTINU	ATION or DIVISIONAL only: The er	tire disclosure of the prior app	lication, from which a cop	y of the oath or declar	ation is supplied under Box
4b, is conside	red a part of the disclosure of the ac	companying continuation or di	visional application and is	hereby incorporated t	by reference. The
incorporation of	an only be relied upon when a portion	on has been inadvertently omit	ted from the submitted ap	oplication parts.	
		17. CORRESPONDE	NCE ADDRESS		
[] Custon	ner Number or Bar Code Label	(Insert Customer No. or here)	Attach bar code labo		lence address below
	John M. Howell				
NAME					
	The Procter & Gamble Company, H	ealth Care Research Center			
ADDRESS	8700 Mason-Montgomery Road				
CITY	Mason	STATE	Ohio	ZIP CODE	45040
COUNTRY	USA	TELEPHONE	513-622-2184	FAX	513-622-3300
Name (Pri	int/Type) John M. Howel	1011	Registration No. (Attorn	ney/Agent) 33,713	3

Signature

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Patent and Trademark Office: C.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 1304.00

Complete if Known			
Application Number			
Filing Date	October , 2000		
First Named Inventor	Paul John Rennie		
Examiner Name			
Group/Art Unit			
Attomey Docket No	8308		

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
1. [X] The Commissioner is hereby authorized to charge indicated	3. ADDITIONAL FEES				
fees and credit any over payments to:	Large Entity Small Entity				
Deposit Account Number 16-2480	Fee Fee Fee				
Deposit Account Name The Procter & Gamble Company	Code (\$) Code (\$) Fee Description Fee Pa	ıid			
Logi	105 130 205 65 Surcharge - late filing fee or oath []				
[X] Charge Any Additional Fee [] Applicant claims small entity Required Under status. See 37 CFR §127	127 50 227 25 Surcharge - late provisional filing [] fee or cover sheet				
37 C.F.R. §§1.16 and 1.17	139 130 139 130 Non-English specification []				
2. [] Payment Enclosed:	147 2,520 147 2,520 For filing a request for ex parte [] reexamination				
Check [] Credit Card [] Money Order [] Other	112 920* 112 920* Requesting publication of SIR prior [] to Examiner's action				
FEE CALCULATION	113 1,840° 113 1,840° Requesting publication of SIR after [] Examiner's action				
1 BASIC FILING FEE	115 110 215 55 Extension for reply within 1" month []				
Large Entity Small Entity	116 390 216 195 Extension for reply within 2 rd month				
Fee Fee Fee Fee Description Fee Paid	117 890 217 445 Extension for reply within 3rd month				
Code (\$) Code (\$)	118 1,390 218 695 Extension for reply within 4* month				
101 710 201 355 Utility filing fee [x]	128 1,890 228 945 Extension for reply within 5° month []				
1ệ6 320 206 160 Design filing fee []	119 310 219 155 Notice of Appeal				
107 490 207 245 Plant filing fee []	120 310 220 155 Filing a brief in support of an appeal []				
108 710 208 355 Reissue filing fee []	121 270 221 135 Request for oral hearing []				
114 150 214 75 Provisional filing fee []	138 1,510 138 1,510 Petition to institute a public use proceeding []				
SUBTOTAL (1) (\$)[710]	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional				
Fee From	142 1,240 242 620 Utility issue fee (or reissue) []				
Extra Claims Below Fee Paid	143 440 243 220 Design issue fee []				
Total Claims [53] - 20** = [33] x [18] = [594]	144 600 244 300 Plant issue fee []				
Independent Claims [2] - 3** = [0] x [80] = [0]	122 130 122 130 Petitions to the Commissioner []				
Multiple Dependent [0] = [0]	123 50 123 50 Petitions related to provisional applications				
** or number previously paid, if greater; For Reissues, see below	126 240 126 240 Submission of IDS				
	581 40 581 40 Recording each patent assignment []				
Large Entity Small Entity	per property (times number of properties)				
Fee Fee Fee Fee Description Code (\$) Code (\$)	146 710 246 355 Filing a submission after final rejection [] (37 CFR § 1.129(a))				
103 18 203 9 Claims in excess of 20	149 710 249 355 For each additional invention to be				
102 80 202 40 Independent claims in excess of 3	examined (37 CFR §1.129(b)				
104 270 204 135 Multiple dependent claim, if not	179 710 279 355 Request for Continued Examination (RCE) []				
paid	169 710 249 355 Request for expedited examination []				
109 80 209 40 **Reissue independent claims	of a design application				
over original patent	Other fee (specify)				
110 18 210 9 "Reissue claims in excess of 20					
and over original patent	Other fee (specify)				
SUBTOTAL (2) (\$)[594]	* Reduced by Basic Filing Fee Paid SUBTOTAL(3) (\$) [

SUBMITTED BY				Complete	(if applicable)
Name (Print/Type)	John M. Howell	Registration No. (Attorney/Agent)	33,713	Telephone	(513) 622-2184
Signature	O.S. no	How Ill		Date	October 19, 2000

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